

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

William C. Espino

(b) Committee Name:

Friends of Willie Espino

(c) Mailing Address:

91-0144 Waihanu Place

San Branch 96706

(d) Phone (Bus)

(Res)

685-1932

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☒ Amended ☐ First ☐ Third
- ☐ 2nd Preliminary Primary ☐ Second ☐ Fourth
- ☒ Final Primary ☐ Short Form
- ☐ Preliminary General
- ☐ Final Election Period
- ☐ Supplemental

REPORTING PERIOD

9/2/02 through 9/21/02

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		749 79
2. Cash on Hand at the Beginning of this Reporting Period.....	9665. 07	
3. Total Receipts (From Line 15).....	5100.	31,089. 37
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	10 765. 07	31,839. 16
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	16,728. 07	27,802. 16
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	4037	4037.
7. Total Loans at the Closing of this Reporting Period.....	0	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	214. 08	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	214. 13	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	3822. 02	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

William C. Espino
Candidate Signature

12/4/02
Date

[Signature]
Treasurer Signature

12/3/02
Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.

² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
11. Contributions From:		
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties		
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	450	
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	4700	
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	5100	
(b) Candidate or Candidate's Immediate Family		
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	0	
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	0	
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	0	
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	5100	
13. Public Funds and Other Receipts.....	0	
14. Loans.....	0	
15. Total Receipts (Add Lines 12 through 14).....	5100	
DISBURSEMENTS		
16. Expenditures.....	10,728.67	
17. Loans Repaid or Forgiven.....	0	
18. Unpaid Expenditures Paid or Forgiven.....	0.00	
19. Subtotal Disbursements (Add Lines 16 through 18).....	10,728.67	
20. Unpaid Expenditures.....	214.08	
21. Total Disbursements (Add Lines 19 and 20).....	10,942.75	

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CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

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SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

William C. Espino

(b) Committee Name:

Friends of Willie Espino

(c) Mailing Address:

91-444 Waihanu Pl. #10

Ewa Beach 96706

(d) Phone (Bus)

(Res)

685-1732

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☒ Amended ☐ First ☐ Third
☐ 2nd Preliminary Primary ☐ Second ☐ Fourth
☒ Final Primary
☐ Preliminary General
☐ Final Election Period
☐ Supplemental

REPORTING PERIOD

9/17/02 through 9/21/02

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		749.79
2. Cash on Hand at the Beginning of this Reporting Period.....	9665.07	
3. Total Receipts (From Line 15).....	5100.	31,039.37
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	12,765.07	31,839.16
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	16,728.67	27,802.16
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	4,037.	4,037.
7. Total Loans at the Closing of this Reporting Period.....	0.	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	214.08	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	214.13	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	3822.82	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

William C. Espino
Candidate Signature

12/4/02
Date

[Signature]
Treasurer Signature

12/3/02
Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.
² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE

CANDIDATE AND CANDIDATE COMMITTEE NAME: _____ PAGE 1 OF 3

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(III)).....

1400

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 3 OF 3

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....

5100

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.